BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the First Amended Accusation Against:)
DANIEL P. TAHERI, M.D.) Case No. 17-2012-223801
Physician's and Surgeon's Certificate No. G 80445)))
Respondent.)

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Medical Board of California, Department of Consumer Affairs, State of California, as its Decision in this matter.

This Decision shall become effective at 5:00 p.m. on April 7, 2016.

IT IS SO ORDERED March 8, 2016.

MEDICAL BOARD OF CALIFORNIA

Howard Krauss, M.D., Chair

Panel B

1	State 2 at 110, 157776		
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4			
5	California Department of Justice 300 South Spring Street, Suite 1702		
6	Los Angeles, CA 90013 Telephone: (213) 897-6793		
7	Facsimile: (213) 897-9395 Attorneys for Complainant		
8	BEFORE THE		
9	MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
10	STATE OF	ALIFORNIA	
11	In the Matter of the First Amended Accusation	Case No. 17-2012-223801	
12	Against:	OAH No.: 2014100190	
13	DANIEL TAHERI, M.D.	STIPULATED SETTLEMENT AND DISCIPLINARY ORDER	
14 15	P.O. Box 16297 Beverly Hills, CA 90209		
16 17	Physician's Surgeon's Certificate No. G80445,		
!	Respondent.		
18			
19	IT IS HEREBY STIPULATED AND AGE	REED by and between the parties to the above-	
20 21	entitled proceedings that the following matters are true:		
22	PARTIES		
23	1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board		
24	of California. She brought this action solely in her official capacity and is represented in this		
25	matter by Kamala D. Harris, Attorney General of the State of California, by Tan N. Tran, Deputy		
26	Attorney General.		
27	2. Respondent (Respondent) is represented in this proceeding by attorney Peter R.		
28	Osinoff, whose address is: 3699 Wilshire Blvd,	10th Floor, Los Angeles, CA 90010.	
- 11			

3. On or about December 21, 1994, the Medical Board of California issued Physician's and Surgeon's Certificate No. G80445 to Daniel Taheri, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in First Amended Accusation No. 17-2012-223801 and will expire on October 31, 2016, unless renewed.

JURISDICTION

- 4. Accusation No. 17-2012-223801 was filed before the Medical Board of California (Board), Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on September 5, 2014. Respondent timely filed his Notice of Defense contesting the Accusation. A First Amended Accusation was also filed on October 26, 2015.
- 5. A copy of the First Amended Accusation No. 17-2012-223801 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in First Amended Accusation No. 17-2012-223801. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation; the right to be represented by counsel at his own expense; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

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CULPABILITY

- 9. Respondent does not contest that at an administrative hearing, complainant could establish a *prima facie* case with respect to the charges and allegations contained in First Amended Accusation No. 17-2012-223801, and that he has thereby subjected his Physician's and Surgeon's Certificate No. G 80445 to disciplinary action.
- 10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

RESERVATION

11. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Medical Board of California or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

CONTINGENCY

12. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

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- 13. The parties understand and agree that facsimile copies of this Stipulated Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as the originals.
- 14. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

A. PUBLIC REPRIMAND

IT IS HEREBY ORDERED that respondent Daniel Taheri, M.D., Physician's and Surgeon's Certificate No. G80445, shall be and is hereby Publicly Reprimanded pursuant to California Business and Professions Code section 2227, subdivision (a)(4). This Public Reprimand, is issued in connection with respondent's care and treatment of four patients, as set forth in First Amended Accusation No. 17-2012-223801, and is as follows:

Respondent, Daniel Taheri, M.D., treated patients E.D., L.R., E.H., and M.P. for skin lesions from 2011 to early 2013. However, the electronic sign-off dates were all in October 2013, and some of the medical records were incomplete, and did not document all patient phone calls and communications with patients. This has been determined to constitute a recordkeeping deficiency within the meaning of Business and Professions Code section 2266.

B. MEDICAL RECORDKEEPING COURSE Within 60 calendar days of the effective date of this decision, respondent shall enroll in a recordkeeping course, at respondent's expense, approved in advance by the Board or its designee. Failure to successfully complete the course within 180 calendar days of the effective date of this Decision shall constitute unprofessional conduct and grounds for further disciplinary action by the Board.

A medical recordkeeping course taken after the acts that gave rise to the charges in the First Amended Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the course would have been approved by the Board or its designee had the course been taken after the effective date of this Decision.

1	Respondent shall submit a certification of successful completion to the Board or its			
2	designee not later than 15 calendar days after successfully completing the course, or not later than			
3	20 calendar days after the effective date of the Decision, whichever is later.			
4	ACCEPTANCE.			
5	I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully			
6	discussed it with my attorney, Peter R. Osinoff. I understand the stipulation and the effect it will			
7	have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and			
8	and domain to home the the			
9	Decision and Order of the Medical Board of California			
10	11.10			
11	DATED: U 23(1) Daniel Taheri, M.D.			
12.	Respondent			
13	I have read and fully discussed with Respondent the terms and conditions and other matters			
14	contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and			
15	content.			
16	DATED: 11/25/17			
17	Peter R. Osinoff Attorney for Respondent			
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	STIPULATED SETTLEMENT (17-2012-223801)			

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California of the Department of Consumer Affairs.

Dated:

11/27/15

Respectfully submitted,

KAMALA D. HARRIS Attorney General of California JUDITH T. ALVARADO Supervising Deputy Attorney General

TAN N. TRAN
Deputy Attorney General
Attorneys for Complainant

Exhibit A

First Amended Accusation No. 17-2012-223801

1 2 3 4 5 6 7 8	KAMALA D. HARRIS Attorney General of California JUDITH T. ALVARADO Supervising Deputy Attorney General TAN N. TRAN Deputy Attorney General State Bar No. 197775 CALIFORNIA DEPARTMENT OF JUSTICE 300 So. Spring Street, Suite 1702 Los Angeles, CA 90013 Telephone: (213) 897-6793 Facsimile: (213) 897-9395 Attorneys for Complainant	FILED STATE OF CALIFORNIA MEDICAL BOARD OF CALIFORNIA SACRAMENTO OLGGE 26 20 15 BY R. FIRDAYS ANALYST	
8	BEFORE THE MEDICAL BOARD OF CALIFORNIA		
9	DEPARTMENT OF CONSUMER AFFAIRS		
10	STATE OF C	CALIFORNIA	
11	In the Matter of the First Amended Accusation	Case No. 17-2012-223801	
12	Against:	OAH No.: 2014100190	
13	DANIEL TAHERI, M.D.	FIRST AMENDED A C C U S A T I O N	
14	P.O. Box 16297	FIRST AMENDED A C C U S A T T U N	
15	Beverly Hills, CA 90209		
16	Physician's and Surgeon's Certificate No. G80445,		
17	Respondent.		
18			
19	Complainant alleges:		
ľ	PAR	TIES	
21	1. Kimberly Kirchmeyer (Complainant) brings this First Amended Accusation solely in	
22	1. Kimberly Kirchmeyer (Complainant) brings this First Amended Accusation solely in her official capacity as the Executive Director of the Medical Board of California, Department of		
23	Consumer Affairs.		
24	2. On or about December 21, 1994, the Medical Board of California issued Physician's		
25			
26	and Surgeon's Certificate Number G80445 to DANIEL TAHERI, M.D. (Respondent). The		
27	Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the		
28	charges brought herein and will expire on October 31, 2016, unless renewed.		
		1	
		First Amended Accusation	

JURISDICTION

- 3. This First Amended Accusation is brought before the Medical Board of California (Board), Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.
 - 4. Section 2004 of the Code states:

"The board shall have the responsibility for the following:

- "(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice Act.
 - "(b) The administration and hearing of disciplinary actions.
- "(c) Carrying out disciplinary actions appropriate to findings made by a panel or an administrative law judge.
- "(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of disciplinary actions.
- "(e) Reviewing the quality of medical practice carried out by physician and surgeon certificate holders under the jurisdiction of the board.
 - "(f) Approving undergraduate and graduate medical education programs.
- "(g) Approving clinical clerkship and special programs and hospitals for the programs in subdivision (f).
 - "(h) Issuing licenses and certificates under the board's jurisdiction.
 - "(i) Administering the board's continuing medical education program."
- 5. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Board deems proper.
 - 6. Section 2234 of the Code, states:

"The board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

- "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter.
 - "(b) Gross negligence.
- "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or omissions. An initial negligent act or omission followed by a separate and distinct departure from the applicable standard of care shall constitute repeated negligent acts.
- "(1) An initial negligent diagnosis followed by an act or omission medically appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.
- "(2) When the standard of care requires a change in the diagnosis, act, or omission that constitutes the negligent act described in paragraph (1), including, but not limited to, a reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the applicable standard of care, each departure constitutes a separate and distinct breach of the standard of care.
 - "(d) Incompetence.
- "(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.
 - "(f) Any action or conduct which would have warranted the denial of a certificate.
- "(g) The practice of medicine from this state into another state or country without meeting the legal requirements of that state or country for the practice of medicine. Section 2314 shall not apply to this subdivision. This subdivision shall become operative upon the implementation of the proposed registration program described in Section 2052.5.
- "(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and participate in an interview scheduled by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board."

7. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct."

FIRST CAUSE FOR DISCIPLINE

(Repeated Negligent Acts- 4 Patients)

8. Respondent is subject to disciplinary action under section 2234, subdivision (c), of the Code for repeated negligent acts in the care and treatment of patients E.D., L.R., E.H., and M.P.¹ The circumstances are as follows:

Patient E.D.

- 9. E.D. first visited Respondent's office ("Center") on or about June 28, 2011, for mole checks and acne. E.D. went to the Center approximately ten times over the course of eight months for treatments. During this time frame, E.D. developed an infection and went to Cedars Sinai for care. E.D. subsequently stopped going to the Center and started seeing another dermatologist, Dr. J. Park. E.D. filed a consumer complaint to the Board against Respondent alleging, among other things, that Respondent conducted excessive biopsies, excessive excisions, caused an arm infection, and refused to provide test results to another doctor.
- 10. A Board expert reviewed the care provided by Respondent to E.D., and the expert found the following departures from the standard of care:
 - a. There were variable electronic sign-off dates of records that are not consistent with evaluation dates, indicating that the medical records are not contemporaneous recordings of the events, or possibly were created at a later date. For example, the dates on the EMR produced by MobileDoc and the electronic sign-off dates are all from October 2013, even though the chart note dates were for dates of service in 2011 and early 2012.²

In this First Amended Accusation, the patients are referred to by initial. The full names of the patients will be disclosed to Respondent in discovery.

² Respondent asserts that the inconsistencies between the electronic sign-off dates with the evaluation dates were the result of Respondent's staff being unfamiliar with the use of the electronic medical record (EMR), which was new, difficult to use, and not specifically tailored to a dermatology practice.

- b. The records are confusing with contrary entries and significant inconsistency to the extent that it is difficult to determine what is being treated or on which areas of the body. Overall, the entries in the medical records lack significant attention to detail and documentation.
- c. There were omissions/inconsistencies in Respondent's records which were sent to the Board, compared to the same records sent earlier to E.D.'s new dermatologist Dr. Park in 2012. Specifically, in the medical records Respondent provided to the Board, there is no documentation that a lost specimen had occurred, or any actions resulting from the loss of an excision specimen.³ Also, there are variations of the operative report for January 10 and January 12, which were provided to Dr. Park, compared to those provided to the Board.
- d. Each excision was reconstructed with a complex repair, even for defects measuring 1 cm in width. Complex reconstruction was utilized for each and every excision on all patients' charts reviewed, without chart documentation of medical necessity.

 Patient L.R.
- 11. L.R. first visited Respondent on or about February 27, 2012, to discuss her concerns about her acne and scarring. After a consultation with Respondent, he prescribed to L.R. painkillers, Spironolactone to control the acne, combined with Sulfameth/Trimethoprim pills dissolved in a toner. Respondent's staff subsequently recommended that L.R. undergo a series of three Vbeam laser treatments and one Fractional CO2 laser treatment. L.R. underwent the first treatment on February 27, 2012. L.R. was charged \$4,300 for *all* the laser treatments. After her first laser treatment, L.R. became dissatisfied and went to U.C.L.A. Dermatology for a second opinion. L.R. later filed a complaint against Respondent and the Center alleging, among other

³ Respondent asserts that he did not document or mention any "lost specimen" in the records to the Board because the pathology report (i.e. "lost specimen") had been found/located by the lab, which originally could not locate the report or the specimen in order to generate a report.

things, that L.R.'s signature on the consent form, dated 2/27/12, for Vbeam laser treatment was forged.⁴

- 12. A Board expert reviewed the care provided by Respondent to L.R., and the expert found the following departures from the standard of care:
 - a. L.R.'s signature on the 3/26/2012 UCLA form, is completely unlike L.R.'s signature on Respondent's consent form.
 - b. There are two medical records/chart notes for the 2/27/12 treatment given to L.R. by Respondent. The first record is signed by Respondent and appears to be the original record for the visit. There is also a second page which is the same as the first with significant additional entries that appear to specifically address L.R.'s complaints about her care, and which were added subsequent to the care given to L.R. on 2/27/12.⁵
 - c. Respondent's medical records are incomplete by not listing all the medications which were prescribed to L.R., not documenting all encounters relevant to the patient's medical care and health, including phone calls, and not documenting who performed the procedure, and their license status.
 - d. Respondent retaining the funds for the unused treatments to L.R. represented a departure from ethical standards.⁶

Patient E.H.

13. E.H. visited Respondent for mole checks. Respondent conducted an exam and subsequently removed a mole. This mole was removed twice, once on September 11, 2012 and again on September 25, 2012. Five more moles were subsequently biopsied by Respondent. E.H. filed a complaint against Respondent alleging, among other things, that some of the procedures were not medically necessary.

⁵ At an interview, Respondent stated that at the time (i.e. 2012) he briefly wrote a note and signed it at the time of the visit (i.e. 2/27/12), and then he went back later and filled details in.

⁶ Respondent asserts that he did, in fact, refund the entire \$4300 to L.R., but that L.R. was still dissatisfied because she wanted to be compensated for her time off work.

⁴ Respondent asserts that he did not have any involvement, whatsoever, in observing or causing L.R.'s signature to be placed on the consent form. S.K., Respondent's employee, stated in a sworn declaration, that she [S.K. not Respondent] signed the witness signature on said consent form "after witnessing Ms. [L.R.] sign the consent form."

14. A Board expert reviewed the care provided by Respondent to E.H., and the expert found the following departures from the standard of care:

- a. E.H.'s visits were in September 2012. However, the sign off dates are not contemporaneous with the visits. This is a significant departure with respect to record-keeping given that over a year elapsed between the visit and sign off dates.
- b. The type of surgeries performed by Respondent were billed as complex closures. However, the lesions and corresponding defects were small and the medical need for complex closures was not documented.

Patient M.P.

- 15. M.P. visited Respondent for mole removals in March 2013, and Respondent removed eight moles on two different days in close proximity. M.P. became suspicious and consulted a dermatopathologist, who advised M.P. that the mole removal was unnecessary. A Board expert reviewed the care provided by Respondent to M.P., and the expert found the following departures from the standard of care:
 - a. M.P. had fifteen actinic keratoses treated at his first visit. The next day, he had additional lesions treated. The need to perform this treatment over two visits is not medically documented. More lesions were listed as treated than documented in the operative report.⁷
 - b. There is no documentation in the medical records of any communication (e.g. phone calls, etc.) with the patient in regards to the left mid-upper back nevus that warranted re-excision, and discussion with the patient to ensure that he understood the need for re-excision.
 - c. The medical record does not document that there was any follow-up with the patient regarding an abnormal laboratory study/pathology report, dated March 12, 2013, regarding the left upper back site, which showed that re-excision was recommended.

⁷ Respondent stated in an interview that cryosurgery was only performed at the second visit and that the medical record is not accurate.